520, 38992CC3

Complete and send this form, together with applicable fee(s), to: Mail

01

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

(571) 273-2885

CURRENT CORRESPONDENCE	ns. CE ADDRESS (Note: Use Block I fo	r any change of address)		Fee(s) Transmittal. T	f mailing can only be used for his certificate cannot be used in	for any other accompanying	
24956 7	590 07/20/2005		papers. Each additional paper, such as an assignment or formal drawing, mus have its own certificate of mailing or transmission.				
1800 DIAGONAL SUITE 370 ALEXANDRIA, V	/A 22314	OIPE	OGE, P.C.	I hereby certify that States Postal Service addressed to the Ma transmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is being with sufficient postage for fir til Stop ISSUE FEE address PTO (571) 273-2885, on the d	mission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.	
21/2005 MBEYENE2 0000	00074 10643973	OCT 2.0 2005	~)			(Depositor's name)	
FC:1501	1400.00		y)			(Signature) (Date)	
APPLICATION NO.	CATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/643,973	08/20/2003	Kazuhisa I			520.38992CX3	4969	
TITLE OF INVENTION: S	TORAGE APPARATUS H	AVING PLURAL C	CONTROLLER	R INCLUDING INTERCON	NECTED MEMORIES		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400		\$300	\$1700	10/20/2005	
EXAMINER		ART UNIT		CLASS-SUBCLASS	7		
RAY, GOPAL C		2111		710-305000	_		
Number is required. ASSIGNEE NAME AND	tion (or "Fee Address" Indic or more recent) attached. Use	se of a Customer BE PRINTED ON T	2 registered listed, no na HE PATENT (f no name is 3		
recordation as set forth in	s an assignee is identified by a 37 CFR 3.11. Completion	of this form is NOT	data will appea a substitute fo	ar on the patent. If an assign or filing an assignment.	nee is identified below, the d	ocument has been filed for	
	(A) NAME OF ASSIGNEE			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
	EE						
				Tokyo, Japan			
(A) NAME OF ASSIGN HITāchi, Lt		ories (will not be pri	nted on the pat		Corporation or other private gro	oup entity Government	
(A) NAME OF ASSIGN HITACHI, Lt lease check the appropriate a. The following fee(s) are	cd.	4b.	. Payment of F	tent): Individual (Case(s):		oup entity Government	
(A) NAME OF ASSIGN HITachi, Lt Please check the appropriate a. The following fee(s) are	e assignee category or categenclosed:	4b.	Payment of F	tent): Individual (Case(s)): the amount of the fee(s) is e	nclosed.	oup entity Government	
(A) NAME OF ASSIGN HITACHI, Lt Please check the appropriate a. The following fee(s) are I issue Fee Publication Fee (No s	e assignee category or categen enclosed: small entity discount permits	4b.	Payment of Foundation A check in Payment by	tent): Individual (Control of the fee(s)) is easy credit card. Form PTO-203	nclosed. 8 is attached.		
(A) NAME OF ASSIGN HITACHI, Lt Please check the appropriate a. The following fee(s) are Issue Fee Advance Order - # o	e assignee category or categenclosed: small entity discount permit	4b.	Payment of Foundation A check in Payment by	tent): Individual (Control of the fee(s)) is easy credit card. Form PTO-203	nclosed.		
(A) NAME OF ASSIGN HITACHI, Lt lease check the appropriate a. The following fee(s) are Issue Fee Advance Order - # o Change in Entity Status a. Applicant claims S	e assignee category or categenclosed: small entity discount permitted f Copies (from status indicated above MALL ENTITY status. See	4b. (red) ; (re)	Payment of Formula A check in Payment by The Direct Deposit Account	tent): Individual (Sec. 1) individual (Sec. 2): the amount of the fee(s) is expected to read the property of the feet of the fee of the feet of the f	nclosed. 18 is attached. 18 charge the required fee(s), or ———————————————————————————————————	credit any overpayment, to opy of this form).	
(A) NAME OF ASSIGN HITACHI, Lt lease check the appropriate a. The following fee(s) are Issue Fee Advance Fee (No solution Fee) Advance Order - # of the control of the co	e assignee category or categenclosed: small entity discount permitted f Copies (from status indicated above MALL ENTITY status. See	4b. (red) ; (re)	Payment of Formula A check in Payment by The Direct Deposit Account	tent): Individual (Sec. 1) individual (Sec. 2): the amount of the fee(s) is expected to read the property of the feet of the fee of the feet of the f	nclosed. 8 is attached. charge the required fee(s), or(enclose an extra c	credit any overpayment, to opy of this form).	
(A) NAME OF ASSIGN HITTACHI, Lt lease check the appropriate a. The following fee(s) are I ssue Fee Advance Order - # o Change in Entity Status a. Applicant claims S	e assignee category or categenclosed: small entity discount permitted f Copies (from status indicated above MALL ENTITY status. See	4b. (red) ; (re)	Payment of Formula A check in Payment by The Direct Deposit Account	tent): Individual (Sec. 1) individual (Sec. 2): the amount of the fee(s) is expected to read the property of the feet of the fee of the feet of the f	nclosed. 18 is attached. 18 charge the required fee(s), or ———————————————————————————————————	credit any overpayment, to opy of this form). FR 1.27(g)(2). ation identified above. he assignee or other party in	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.